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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	_	
Case number (if known)	_ Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	Part 1: Identify Yourself						
		About Debtor 1:	About Debtor 2 (Spouse Only in a Join	nt Case):			
1.	Your full name						
	Write the name that is on	Diane					
	your government-issued picture identification (for example, your driver's	First name	First name				
	license or passport).	Middle name	Middle name				
	Bring your picture	Bodie					
	identification to your meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)				
2.	All other names you have used in the last 8 years Include your married or maiden names.	Diane Mitchell					
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-1385					

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Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.		
	Include trade names and doing business as names	Business name(s)	Business name(s)		
		EINs	EINs		
5.	Where you live	1525 Schoenherr Ave.	If Debtor 2 lives at a different address:		
		Bolingbrook, IL 60490 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code		
		Will County	County		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: ☐ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		

Debtor 1 Diane Bodie

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Deb	ebtor 1 Diane Bodie				Case number (if known)			
Par	t 2: Tell the Court About	Your Bankruptcy	Case					
7.	The chapter of the Bankruptcy Code you are		Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.					
	choosing to file under	☐ Chapter 7	Chapter 7					
		☐ Chapter 11						
		☐ Chapter 12						
		Chapter 13						
8.	How you will pay the fee	about how order. If yo a pre-print	you may pay. Typically, in our attorney is submitting you address.	f you are paying the fee you your payment on your beh	ck with the clerk's office in your local court for more details ourself, you may pay with cash, cashier's check, or money half, your attorney may pay with a credit card or check with			
			pay the fee in installment Fee in Installments (Offici		on, sign and attach the Application for Individuals to Pay			
		☐ I request to but is not rethat applie	that my fee be waived (Y equired to, waive your fee s to your family size and y	ou may request this option on may request this option on the control of the contr	on only if you are filing for Chapter 7. By law, a judge may, our income is less than 150% of the official poverty line fee in installments). If you choose this option, you must fill			
		out the <i>Ap</i>	plication to Have the Cha	oter 7 Filing Fee Waived ((Official Form 103B) and file it with your petition.			
9.	Have you filed for bankruptcy within the	■ No.						
	last 8 years?	☐ Yes.						
		Distri	ct					
		Distri	ct					
		Distri	ct	When	Case number			
10.	Are any bankruptcy cases pending or being	■ No						
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.						
		Debto	or		Relationship to you			
		Distri	ct	When	Case number, if known			
		Debto	or		Relationship to you			
		Distri	ct	When	Case number, if known			
11.	Do you rent your	■ No. Go t	o line 12.					
	residence?	☐ Yes. Has	your landlord obtained ar	n eviction judgment agains	st you and do you want to stay in your residence?			
			No. Go to line 12.					
			Yes. Fill out <i>Initial Sta</i> bankruptcy petition.	tement About an Eviction	Judgment Against You (Form 101A) and file it with this			

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Del	btor 1 Diane Bodie			Case number (if known)
Par	rt 3: Report About Any B	usinesses	You Own as a Sole Propri	etor
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.	
		☐ Yes.	Name and location of bu	siness
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any	<i>'</i>
	If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.		Number, Street, City, St Check the appropriate b	ate & ZIP Code ox to describe your business:
			☐ Health Care Bus	iness (as defined in 11 U.S.C. § 101(27A))
			☐ Single Asset Rea	al Estate (as defined in 11 U.S.C. § 101(51B))
			☐ Stockbroker (as	defined in 11 U.S.C. § 101(53A))
			☐ Commodity Brok	er (as defined in 11 U.S.C. § 101(6))
			☐ None of the above	ve
13.	Chapter 11 of the deadlines. Bankruptcy Code and are operations		s. If you indicate that you are	e court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of federal income tax return or if any of these documents do not exist, follow the procedure apter 11.
	For a definition of small business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapte Code.	r 11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am filing under Chapte	r 11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Par	rt 4: Report if You Own o	or Have Any	/ Hazardous Property or A	ny Property That Needs Immediate Attention
14.	Do you own or have any property that poses or is alleged to pose a threat	■ No.		
	of imminent and identifiable hazard to public health or safety? Or do you own any		What is the hazard?	
	property that needs immediate attention?		If immediate attention is needed, why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?	
				Number, Street, City, State & Zip Code

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			[Document Page 5 c	of 48	}		
Deb	tor 1 Diane Bodie						Case number (if kn	own)
Par	Explain Your Efforts t	o Re	eceive a Briefing Ab	out Credit Counseling				
15.	Tell the court whether you have received a briefing about credit counseling.		counseling agence	ng from an approved credit by within the 180 days before I tcy petition, and I received a		Υοι	must check one: I received a brieficounseling agence	se Only in a Joint Case): ing from an approved credit cy within the 180 days before I filed petition, and I received a certificate of
	The law requires that you receive a briefing about credit counseling before		Attach a copy of th	e certificate and the payment u developed with the agency.			Attach a copy of the	ne certificate and the payment plan, if eloped with the agency.
	you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.		counseling agence filed this bankrup a certificate of co	•			counseling agenthis bankruptcy partificate of com	cy within the 180 days before I filed petition, but I do not have a appletion.
	If you file anyway, the court can dismiss your case, you			er you file this bankruptcy file a copy of the certificate and y.				
	will lose whatever filing fee you paid, and your creditors can begin collection activities again.		services from an a unable to obtain t days after I made	ed for credit counseling approved agency, but was hose services during the 7 my request, and exigent erit a 30-day temporary waiver t.			from an approve those services do request, and exig temporary waive	d agency, but was unable to obtain uring the 7 days after I made my gent circumstances merit a 30-day r of the requirement.
			requirement, attach what efforts you may you were unable to	y temporary waiver of the naseparate sheet explaining ade to obtain the briefing, why obtain it before you filed for nat exigent circumstances			attach a separate to obtain the briefi before you filed fo circumstances req	ourt is satisfied with your reasons, you must still a briefing within 30 days after you file. You must entificate from the approved agency, along with a the payment plan you developed, if any. If you do so, your case may be dismissed. The sension of the 30-day deadline is granted only for and is limited to a maximum of 15 days. The trequired to receive a briefing about creditaling because of: Capacity. I have a mental illness or a mental
			required you to file Your case may be					
			briefing before you If the court is satisf still receive a briefi You must file a cer agency, along with	filed for bankruptcy. ied with your reasons, you must ng within 30 days after you file. tificate from the approved a copy of the payment plan you			receive a briefing of file a certificate from copy of the payme	within 30 days after you file. You must om the approved agency, along with a ent plan you developed, if any. If you do
			may be dismissed. Any extension of the	f you do not do so, your case ne 30-day deadline is granted is limited to a maximum of 15				
			days.	to receive a briefing about			I am not required counseling becar	
			☐ Incapacity.	I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.			☐ Incapacity.	I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.
			☐ Disability.	My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.			☐ Disability.	My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.
			☐ Active duty.	I am currently on active military duty in a military combat zone.			☐ Active duty.	I am currently on active military duty in a military combat zone.
			briefing about cred	are not required to receive a it counseling, you must file a of credit counseling with the				are not required to receive a briefing seling, you must file a motion for waiver g with the court.

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Debt	or 1 Diane Bodie			Case number	(if known)			
Part	6: Answer These Questi	ons for Rep	oorting Purposes					
16.	What kind of debts do you have?		6a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."					
		I	☐ No. Go to line 16b.					
	Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? How many Creditors do you estimate that you owe?	1	Yes. Go to line 17.					
				ess debts? Business debts are debts tent or through the operation of the business				
		ı	☐ No. Go to line 16c.					
		I	☐ Yes. Go to line 17.					
		16c. S	State the type of debts you owe t	hat are not consumer debts or busines:	s debts			
17.		■ No.	am not filing under Chapter 7. G	Go to line 18.				
	after any exempt			ou estimate that after any exempt prope be available to distribute to unsecured				
	administrative expenses	i	□ No		25,001-50,000			
	be available for distribution to unsecured	1	□Yes					
18.	you estimate that you	■ 1-49 □ 50-99		□ 1,000-5,000 □ 5001-10,000	□ 25,001-50,000 □ 50,001-100,000			
	owe?	☐ 100-199 ☐ 200-999		□ 10,001-25,000	☐ More than100,000			
19.	How much do you estimate your assets to	■ \$0 - \$50		□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million	☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion			
	be worth?	□ \$100,00	- \$100,000 01 - \$500,000 01 - \$1 million	□ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion			
20.	How much do you estimate your liabilities	\$0 - \$50		☐ \$1,000,001 - \$10 million ☐ \$10,000,001 - \$50 million	□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion			
	to be?	□ \$100,00	1 - \$100,000 01 - \$500,000 01 - \$1 million	□ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	\$10,000,000,001 - \$50 billion More than \$50 billion			
Part	7: Sign Below							
For	you	I have exa	mined this petition, and I declare	under penalty of perjury that the inform	nation provided is true and correct.			
				m aware that I may proceed, if eligible, available under each chapter, and I ch	under Chapter 7, 11,12, or 13 of title 11, cose to proceed under Chapter 7.			
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).						
		I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.						
			case can result in fines up to \$2 3571.	cealing property, or obtaining money o 250,000, or imprisonment for up to 20 y	r property by fraud in connection with a ears, or both. 18 U.S.C. §§ 152, 1341,			
		Diane Bo Signature	die	Signature of Debtor	2			
		Executed of	February 11, 2016 MM / DD / YYYY	Executed on MM /	/ DD / YYYY			

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Debtor 1 Diane Bodie		Cas	se number (if known)
For your attorney, if you are represented by one	, , , , , , , , , , , , , , , , , , , ,	•	e informed the debtor(s) about eligibility to proceed explained the relief available under each chapter
If you are not represented by an attorney, you do not need to file this page.	for which the person is eligible. I also certify	that I have delivered to the) applies, certify that I have	
	/s/ Brian P. Deshur Signature of Attorney for Debtor	Date	February 11, 2016 MM / DD / YYYYY
	Brian P. Deshur Printed name		
	Deshur Law Firm LLC Firm name		
	55 W. Monroe Suite 3950		
	Chicago, IL 60603 Number, Street, City, State & ZIP Code		
	Contact phone 312-380-1564	Email address	brian@deshurlaw.com
	6289354		

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ill in this information to identify your case:					
Diane Bodie					
First Name	Middle Name	Last Name			
First Name	Middle Name	Last Name			
ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS			
				☐ Check if this is an amended filing	
	Diane Bodie First Name First Name	Diane Bodie First Name Middle Name First Name Middle Name	Diane Bodie First Name Middle Name Last Name First Name Middle Name Last Name	Diane Bodie First Name Middle Name Last Name First Name Middle Name Last Name	

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

info	is complete and accurate as possible. If two married people are filing together, both are equally responsible formation. Fill out all of your schedules first; then complete the information on this form. If you are filing amender original forms, you must fill out a new <i>Summary</i> and check the box at the top of this page.		
Par	t 1: Summarize Your Assets		
		Your as	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	2,500.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	4,777.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	7,277.00
Par	t 2: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	14,005.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	11,273.35
	Your total liabilities	\$	25,278.35
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	1,918.58
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	1,723.58
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other so	chedules.
	Yes		

- Yes
- What kind of debt do you have?
 - Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
 - Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

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Debtor 1 Diane Bodie Case number (if known)

3. **From the** Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

556.58

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total cla	im
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

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	Ü		
Fill in this information to identify your case and t	his filing:		
Debtor 1 Diane Bodie First Name Middl	e Name Last Name		
Debtor 2	e Name Last Name		
	e Name Last Name		
United States Bankruptcy Court for the: NORTHER	RN DISTRICT OF ILLINOIS		
Case number			☐ Check if this is an amended filing
Official Form 106 A/P			
Official Form 106A/B Schedule A/B: Property			12/15
In each category, separately list and describe items. List a it fits best. Be as complete and accurate as possible. If tw more space is needed, attach a separate sheet to this forn	o married people are filing together, both are equally	responsible for supplying	correct information. If
Part 1: Describe Each Residence, Building, Land, or Ott			
Do you own or have any legal or equitable interest in a	ny residence, building, land, or similar property?		
☐ No. Go to Part 2.			
Yes. Where is the property?			
— Test. Where is the property:			
1.1	What is the property? Check all that apply		
Silverleaf Resorts, Inc.	☐ Single-family home		aims or exemptions. Put the
8505 W. Irlo Bronson Memorial Hwy Street address, if available, or other description	Duplex or multi-unit building	amount of any secured cla Creditors Who Have Clair	
,	Condominium or cooperative		
		Current value of the	Current value of the
Kissimmee FL 34747-0000	Land	entire property?	portion you own?
City State ZIP Code	Investment property	\$2,500.00	\$2,500.00
	■ Timeshare □ Other	Describe the nature of y	
	Who has an interest in the property? Check one	(such as fee simple, ten a life estate), if known.	ancy by the entireties, or
	Debtor 1 only	Fee simple	
Osceola	Debtor 2 only		
County	Debtor 1 and Debtor 2 only	Chapte if this is som	
	At least one of the debtors and another	Check if this is com (see instructions)	imunity property
	Other information you wish to add about this item property identification number:	, such as local	
	Surrender		
Add the dollar value of the portion you own for pages you have attached for Part 1. Write that	or all of your entries from Part 1, including any	entries for	\$2,500.00
Part 2: Describe Your Vehicles			

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

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Deb	tor 1 Di	ane Bodie		Case number (if known)	
3. C a	ars, vans,	trucks, tractors, sport utility ve	hicles, motorcycles		
_	Na				
	No				
	Yes				
		Chauralat		Do not deduct secure	d claims or exemptions. Put
3.1		Chevrolet Malibu	Who has an interest in the property? Check one	the amount of any sec	cured claims on Schedule D:
	Model:		■ Debtor 1 only	Creditors Who Have 0	Claims Secured by Property.
	Year:	2007 ate mileage: 154,000	Debtor 2 only	Current value of the	Current value of the
	Other info		☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	entire property?	portion you own?
	Other mile	maton.	At least one of the debtors and another		
			☐ Check if this is community property (see instructions)	\$950.00	950.00
		Pontiac		Do not deduct secure	d claims or exemptions. Put
3.2			Who has an interest in the property? Check one	the amount of any sec	cured claims on Schedule D:
	Model:	G5	Debtor 1 only	Creditors Who Have 0	Claims Secured by Property.
	Year:	2009	Debtor 2 only	Current value of the entire property?	Current value of the
	Other info	ate mileage: 100,000	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	entire property?	portion you own?
	Other line	maton.	At least one of the debtors and another		
			Check if this is community property (see instructions)	\$2,525.0	\$2,525.00
			n for all of your entries from Part 2, including that number here		\$3,475.00
_					
Part		e Your Personal and Household Ite			On many to reduce of the
ро ў	ou own o	r nave any legal or equitable in	terest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
		goods and furnishings Major appliances, furniture, linens	, china, kitchenware		
_	res. Des	scribe			
		Furniture			\$500.00
		Felevisions and radios; audio, videncluding cell phones, cameras, m	eo, stereo, and digital equipment; computers, p nedia players, games	printers, scanners; music coll	ections; electronic devices
	No				
	Yes. Des	scribe			
٠ ر	ollectibles	of value			
Ε	xamples: P		prints, or other artwork; books, pictures, or oth llectibles	ner art objects; stamp, coin, o	r baseball card collections;
	No				
ᆫ	Yes. Des	scribe			

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Debtor	1 Diane Bodie		Case number (if known)	
Exa	musical instruments		y equipment; bicycles, pool tables, golf clubs, skis; canoe	s and kayaks; carpentry tools;
■ N	lo ′es. Describe			
10. Fire	earms eamples: Pistols, rifles, shotg	uns, ammunition, and rela	ted equipment	
■ N □ Y	lo ′es. Describe			
11. Clo	othes amples: Everyday clothes, fu	ure leather coate designe	r wear choos accessories	
	lo	urs, reatrier coats, designe	i wear, silves, accessories	
■ Y	es. Describe			\$500.00
	Cloth	nes		\$500.00
■ N	amples: Everyday jewelry, co	ostume jewelry, engageme	ent rings, wedding rings, heirloom jewelry, watches, gems,	gold, silver
	es. Describe			
Ex ■ N	amples: Dogs, cats, birds, he	orses		
-	-	ehold items you did not a	already list, including any health aids you did not list	
■ N □ Y	lo 'es. Give specific information	n		
			s, including any entries for pages you have attached	\$1,000.00
Part 4:				
Do you	own or have any legal or	equitable interest in any	of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
■ N	amples: Money you have in	-	in a safe deposit box, and on hand when you file your peti	tion
	institutions. If you h		s; certificates of deposit; shares in credit unions, brokerage the same institution, list each.	e houses, and other similar
	es		Institution name:	
	17.1.	Checking	Chase	\$0.00
	17.2.	. Checking	PNC	\$50.00
	17.3.	Checking	Abri Credit Union	\$252.00

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De	btor 1	Diane Bodie	Case number (if known)	
18.		mutual funds, or publicly traded stocks ples: Bond funds, investment accounts with brokerag	ge firms, money market accounts	
	■ No	In all the state of the state o		
	⊔ Yes			
19.		iblicly traded stock and interests in incorporated int venture	and unincorporated businesses, including an interest in	an LLC, partnership,
	■ No			
	⊔ Yes.	Give specific information about them Name of entity:	% of ownership:	
	Negoti Non-n	nment and corporate bonds and other negotiable able instruments include personal checks, cashiers' egotiable instruments are those you cannot transfer to	checks, promissory notes, and money orders.	
	■ No	Cive appoiling information about them		
	⊔ Yes.	Give specific information about them Issuer name:		
	Examp	nent or pension accounts bles: Interests in IRA, ERISA, Keogh, 401(k), 403(b),	thrift savings accounts, or other pension or profit-sharing plan	s
	■ No			
	⊔ Yes.	List each account separately. Type of account:	Institution name:	
	Your s	y deposits and prepayments hare of all unused deposits you have made so that y les: Agreements with landlords, prepaid rent, public	vou may continue service or use from a company utilities (electric, gas, water), telecommunications companies,	or others
			Institution name or individual:	
	— 100.			
		ies (A contract for a periodic payment of money to y	ou, either for life or for a number of years)	
	■ No □ Yes	Issuer name and description.		
	⊔ Yes			
		s in an education IRA, in an account in a qualifie C. §§ 530(b)(1), 529A(b), and 529(b)(1).	ed ABLE program, or under a qualified state tuition progra	m.
	□ Yes	Institution name and description. Sep	arately file the records of any interests.11 U.S.C. § 521(c):	
	Trusts ■ No	equitable or future interests in property (other the	han anything listed in line 1), and rights or powers exercis	able for your benefit
	☐ Yes.	Give specific information about them		
	Examp	s, copyrights, trademarks, trade secrets, and other less: Internet domain names, websites, proceeds from		
	■ No □ Yes.	Give specific information about them		
		es, franchises, and other general intangibles bles: Building permits, exclusive licenses, cooperative	e association holdings, liquor licenses, professional licenses	
		Give specific information about them		
М	oney or	property owed to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.
	Tax ref ■ No	unds owed to you		
		Give specific information about them, including whet	ther you already filed the returns and the tax years	

Official Form 106A/B Schedule A/B: Property page 4

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De	ebtor 1	Diane Bodie	Case number (if known)	
29.	-	support oles: Past due or lump sum alimony, spousal support, child support,	maintenance, divorce settlement, property	settlement
	■ No □ Yes.	Give specific information		
		amounts someone owes you bles: Unpaid wages, disability insurance payments, disability benefits benefits; unpaid loans you made to someone else	s, sick pay, vacation pay, workers' compen	sation, Social Security
	☐ Yes.	Give specific information		
31.		ets in insurance policies oles: Health, disability, or life insurance; health savings account (HSA	A); credit, homeowner's, or renter's insuran	се
	_	Name the insurance company of each policy and list its value. Company name:	Beneficiary:	Surrender or refund value:
	If you a some of	terest in property that is due you from someone who has died are the beneficiary of a living trust, expect proceeds from a life insurance has died. Give specific information	ance policy, or are currently entitled to rece	ive property because
	Examp ■ No	against third parties, whether or not you have filed a lawsuit or ples: Accidents, employment disputes, insurance claims, or rights to Describe each claim		
	■ No	contingent and unliquidated claims of every nature, including continuous cont	ounterclaims of the debtor and rights to	set off claims
35.	Any fin	nancial assets you did not already list		
	■ No □ Yes.	Give specific information		
36		he dollar value of all of your entries from Part 4, including any eart 4. Write that number here	. • .	\$302.00
Pa	rt 5: De	scribe Any Business-Related Property You Own or Have an Interest In. Lis	st any real estate in Part 1.	
37.	Do you o	own or have any legal or equitable interest in any business-related propert	y?	
ı	No. Go	to Part 6.		
[☐ Yes. G	Go to line 38.		
Pa		scribe Any Farm- and Commercial Fishing-Related Property You Own or Foundary on the outliness of the Any Farm- and Commercial Fishing-Related Property You Own or Foundary Own	lave an Interest In.	
46.		own or have any legal or equitable interest in any farm- or com	nmercial fishing-related property?	
	_	. Go to line 47.		
Pa	rt 7:	Describe All Property You Own or Have an Interest in That You Did Not	List Above	
53.		have other property of any kind you did not already list? bles: Season tickets, country club membership		
	■ No			
	☐ Yes.	Give specific information		

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Debtor 1 Diane Bodie		Case number (if known)	
54. Add the dollar value of all of your entries from Part 7. Write	that number here		\$0.00
Part 8: List the Totals of Each Part of this Form			
55. Part 1: Total real estate, line 2			\$2,500.00
56. Part 2: Total vehicles, line 5	\$3,475.00		
57. Part 3: Total personal and household items, line 15	\$1,000.00		
58. Part 4: Total financial assets, line 36	\$302.00		
59. Part 5: Total business-related property, line 45	\$0.00		
60. Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61. Part 7: Total other property not listed, line 54	+\$0.00		
62. Total personal property. Add lines 56 through 61	\$4,777.00	Copy personal property total	\$4,777.00
63. Total of all property on Schedule A/B . Add line 55 + line 62			\$7,277.00

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Fill in this information to identify your case:							
Debtor 1	Diane Bodie						
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse if, filing)	First Name	Middle Name	Last Name				
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS				
Case number							
(if known)					Check if this is an amended filing		

Official Form 106C

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify the I	Property You	Claim as	Exempt

1. Whic	n set of exemptions are	you claiming?	? Check one only,	, even if y	our spouse is	filing with	you.
---------	-------------------------	---------------	-------------------	-------------	---------------	-------------	------

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
Copy the value from Schedule A/B	Ched	ck only one box for each exemption.	
\$950.00		\$950.00	735 ILCS 5/12-1001(c)
		100% of fair market value, up to any applicable statutory limit	
\$2,525.00		\$2,525.00	735 ILCS 5/12-1001(b)
		100% of fair market value, up to any applicable statutory limit	
\$500.00		\$500.00	735 ILCS 5/12-1001(b)
		100% of fair market value, up to any applicable statutory limit	
\$500.00		\$500.00	735 ILCS 5/12-1001(a)
		100% of fair market value, up to any applicable statutory limit	
\$50.00	•	\$50.00	735 ILCS 5/12-1001(b)
	\$950.00 \$500.00	\$500.00	Schedule A/B \$950.00 \$950.00 \$950.00 \$950.00 \$100% of fair market value, up to any applicable statutory limit \$2,525.00 \$100% of fair market value, up to any applicable statutory limit \$500.00 \$500.00 \$100% of fair market value, up to any applicable statutory limit \$500.00 \$100% of fair market value, up to any applicable statutory limit \$500.00 \$100% of fair market value, up to any applicable statutory limit

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ebtor 1	Diane Bodie		Case number (if known)		
	description of the property and line on edule A/B that lists this property	Current value of the portion you own			
		Copy the value from Schedule A/B	Check only one box for each exemption.		
	ecking: Abri Credit Union from Schedule A/B: 17.3	\$252.00	\$252.00	735 ILCS 5/12-1001(b)	
LING	Hom Genedale A/B. The		☐ 100% of fair market value, up to any applicable statutory limit		
	No	y 3 years after that for ca	5? ases filed on or after the date of adjustme thin 1,215 days before you filed this case	,	
Ц	■ No	rea by the exemption w	triin 1,215 days before you filed triis case	·	
	☐ Yes				

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Fill in this informat	ion to identify you	ur case:				
	Diane Bodie					
_	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bankr	uptcy Court for the	: NORTHERN DISTRICT OF II	LLINOIS			
Case number (if known)						if this is an led filing
Official Form 1	106D					
-		Who Have Claims	Secure	d by Propert	v	12/15
Be as complete and acc	curate as possible. I	f two married people are filing togeth , number the entries, and attach it to	ner, both are equ	ally responsible for sup	plying correct informatio	
1. Do any creditors hav	e claims secured by	your property?				
□ No. Check thi	s box and submit t	his form to the court with your oth	er schedules. \	ou have nothing else	to report on this form.	
Yes. Fill in all	of the information	below.				
Part 1: List All S	ecured Claims					
2. List all secured clair	ms. If a creditor has n	nore than one secured claim, list the cre	editor separately f	or Column A	Column B	Column C
		particular claim, list the other creditors in ler according to the creditor's name.	n Part 2. As much	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1 Santander C	onsumer	Describe the property that secures	the claim:	\$10,005.00	\$2,525.00	\$7,480.00
Creditor's Name		2009 Pontiac G5 100,000 m				
		2003 1 0111140 03 100,000 11	iiic3			
		As of the date you file, the claim is	• Chack all that			
PO Box 6606		apply.	: Check all that			
Dallas, TX 7		Contingent				
Number, Street, City	y, State & Zip Code	☐ Unliquidated				
Who owes the debt?	Check one.	☐ Disputed Nature of lien. Check all that apply	1			
Debtor 1 only		☐ An agreement you made (such as		ured		
Debtor 2 only		car loan)	· ······gaga ar aas			
Debtor 1 and Debtor	r 2 only	☐ Statutory lien (such as tax lien, me	echanic's lien)			
At least one of the d	ebtors and another	☐ Judgment lien from a lawsuit				
☐ Check if this claim	relates to a	Other (including a right to offset)	Automobil	e PMSI		
community debt						
Date debt was incurre	d	Last 4 digits of account nun	nber			
2.2 Silverleaf Re	esorts	Describe the property that secures	the claim:	\$4,000.00	\$2,500.00	\$0.00
Creditor's Name		Silverleaf Resorts, Inc. 850				
		Bronson Memorial Hwy Kis				
		FL 34747 Osceola County Surrender				
8505 W. Irlo		As of the date you file, the claim is	: Check all that			
Memorial Hv Kissimmee,	•	apply.				
Number, Street, City		Contingent				
Number, Street, Oily	y, State & Zip Code	☐ Unliquidated☐ Disputed				
Who owes the debt?	Check one.	Nature of lien. Check all that apply				
Debtor 1 only		An agreement you made (such as car loan)	s mortgage or sec	eured		
Debtor 2 only						
☐ Debtor 1 and Debtor ☐ At least one of the d	· ·	☐ Statutory lien (such as tax lien, many displayment lien from a lawsuit	echanic's lien)			
Check if this claim community debt		 Other (including a right to offset) 	Mortgage			
Date debt was incurred	d	Last 4 digits of account num	nher			

Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property

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Debto	1 Diane Bodie			Case	Case number (if know)		
	First Name	Middle Name	Last Name				
Add	he dollar value of you	r entries in Column A on th	nis page. Write that number h	nere:	\$14,005.00		
	is the last page of yo that number here:	ur form, add the dollar val	ue totals from all pages.		\$14,005.00		
Part 2	List Others to Be	e Notified for a Debt Th	at You Already Listed				
to colle	ect from you for a debt	you owe to someone else that you listed in Part 1, lis	, list the creditor in Part 1, an	nd then list the co	r listed in Part 1. For example, i llection agency here. Similarly ave additional persons to be no	, if you have more than one	
	Name Address						
	-NONE-		On v	which line in I	Part 1 did you enter the	creditor?	
			Last	4 digits of a	ccount number		

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					<u> </u>			
Fill in t	his informa	ation to identify your	case:					
Debtor	1	Diane Bodie						
		First Name	Middle Name	9	Last Name			
Debtor (Spouse it		First Name	Middle Name		Last Name			
` '			wilddie Nam	.	Last Name			
United	States Bank	cruptcy Court for the:	NORTHERN D	DISTRICT OF I	ILLINOIS			
Case n	umber							
(if known)								Check if this is an
								amended filing
Officia	al Form	106E/E						
		 F: Creditors W	ha Haya I	Inconuro	d Claima			12/15
							DIODITY -I-:	ms. List the other party to
Schedule D: Credit the Conti number (e G: Executor tors Who Havinuation Pag (if known).	ry Contracts and Unexpir ve Claims Secured by Pro e to this page. If you have	red Leases (Offici operty. If more sp e no information t	al Form 106G). I ace is needed, c o report in a Pa	copy the Part you need, fi	ors with partially sec	ured claims tentries in the	I Form 106A/B) and on that are listed in Schedule boxes on the left. Attach write your name and case
Part 1:		of Your PRIORITY Un						
_	•	have priority unsecured	claims against ye	ou?				
I	No. Go to Par	t 2.						
Part 2:	List All	of Your NONPRIORIT	Y Unsecured C	laims				
3. Do a	any creditors	have nonpriority unsecu	ured claims again	st you?				
	No. You have	nothing to report in this pa	rt. Submit this forn	n to the court with	n your other schedules.			
	Yes.							
4. List	all of your n	ditor separately for each cla	aim. For each clain	n listed, identify v	he creditor who holds eac what type of claim it is. Do r re than three nonpriority un	not list claims already i	included in Pa	
								Total claim
4.1	DuPage I	Medical Group	La	ast 4 digits of ac	count number			\$136.00
		Creditor's Name						
	Chicago,	ollections Center Dr . ม. 60693	·. vv	hen was the del	bt incurred?			_
		eet City State Zlp Code	A:	s of the date you	u file, the claim is: Check	all that apply		
	Who incurre	ed the debt? Check one.	г	Contingent				
	Debtor 1	only		Unliquidated				
	Debtor 2	only		Disputed				
	Debtor 1	and Debtor 2 only		•	ORITY unsecured claim:			
	☐ At least o	one of the debtors and ano		Student loans				
		this claim is for a comm subject to offset?	· -	Obligations aris	sing out of a separation agr	reement or divorce tha	t you did not	
	■ No			Debts to pension	on or profit-sharing plans, a	and other similar debts		
	☐ Yes			Other. Specify	Notice Only			
				-1)	· · · · · · · · · · · · · · · · · · ·			_

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Debtor	1 Diane Bodie	Case number (if know)	
4.2	Dupage Medical Group	Last 4 digits of account number	\$3,075.50
	Nonpriority Creditor's Name 159 Collections Center Drive Chicago, IL 60693	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent	
	■ Debtor 1 only	☐ Unliquidated	
	☐ Debtor 2 only	☐ Disputed	
	☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	☐ At least one of the debtors and another	☐ Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Collections	
4.3	Edward Hospital	Last 4 digits of account number	\$662.95
	Nonpriority Creditor's Name PO Box 4207 Carol Stream, IL 60197	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	Continued	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
	☐ At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Collections	
4.4	Elmhurst Hospital Inpatient	Last 4 digits of account number	\$798.00
	Nonpriority Creditor's Name 155 Brush Hill Road Elmhurst, IL 60126	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	Continued	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
	☐ At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify Collections	

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Debtor	1 Diane Bodie	Case number (if know)					
4.5	ELMHURST MEMORIAL HOSPITAL	Last 4 digits of account number		\$0.00			
	Nonpriority Creditor's Name 155 E Brush Hill Rd Elmhurst, IL 60126	When was the debt incurred?					
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply				
	Who incurred the debt? Check one.	☐ Contingent					
	Debtor 1 only	☐ Unliquidated					
	☐ Debtor 2 only	☐ Disputed					
	☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured	l claim:				
	☐ At least one of the debtors and another	☐ Student loans					
	☐ Check if this claim is for a community debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	Other. Specify					
4.6	ERC/Enhanced Recovery Corp	Last 4 digits of account number	9986	\$440.00			
	Nonpriority Creditor's Name 8014 Bayberry Rd Jacksonville, FL 32256	When was the debt incurred?	Opened 11/01/14				
	Number Street City State Zlp Code	As of the date you file, the claim i					
	Who incurred the debt? Check one.	☐ Contingent					
	Debtor 1 only	☐ Unliquidated					
	☐ Debtor 2 only	☐ Disputed					
	☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured	l claim:				
	\square At least one of the debtors and another	☐ Student loans					
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims					
	■ No	Debts to pension or profit-sharing					
	Yes	Other. Specify Collection					
4.7	Global Payments Check	Last 4 digits of account number	2501	\$350.00			
	Nonpriority Creditor's Name		Omerced 0/04/00 Least Active				
	Po Box 59371 Chicago, IL 60659	When was the debt incurred?	Opened 9/01/09 Last Active 12/31/09				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply				
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	Disputed					
	At least one of the debtors and another	Type of NONPRIORITY unsecured					
	☐ Check if this claim is for a community debt	☐ Student loans					
	Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims					
	■ No	Debts to pension or profit-sharin					
	☐ Yes	■ Other. Specify					
	— 103	Otner. Specify					

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Debto	1 Diane Bodie	Case number (if know)	
4.8	Lockport Fire & Ambulance Nonpriority Creditor's Name	Last 4 digits of account number	\$0.00
	19623 Renwick Road Lockport, IL 60441	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent	
	■ Debtor 1 only	☐ Unliquidated	
	Debtor 2 only		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
	☐ At least one of the debtors and another	☐ Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Collections	
4.9	Malcolm S. Gerald and Associates	Last 4 digits of account number	\$0.00
	Nonpriority Creditor's Name 332 S. Michigan Ave. Ste 600	When was the debt incurred?	
	Chicago, IL 60604		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent	
	Debtor 1 only	☐ Unliquidated	
	Debtor 2 only	☐ Disputed	
	☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	☐ At least one of the debtors and another	☐ Student loans	
	☐ Check if this claim is for a community debt	\square Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Collections	
4.10	Merchants Credit	Last 4 digits of account number 1726	\$2,504.00
	Nonpriority Creditor's Name 223 W Jackson Blvd Ste 700	When was the debt incurred? Opened 8/01/15	
	Chicago, IL 60606	As of the date were file the plains in Oberly all that are he	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	_	☐ Contingent	
	Debtor 1 only	☐ Unliquidated	
	Debtor 2 only	☐ Disputed	
	☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	☐ At least one of the debtors and another	☐ Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	$\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Collection Attorney Adventist Bolingbrook Hospital	

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Debtor	1 Diane Bodie		Case number (if know)					
4.11	Merchants Credit Nonpriority Creditor's Name	Last 4 digits of account number	6816	\$71.00				
	223 W Jackson Blvd Ste 700	When was the debt incurred?	Opened 6/01/14					
	Chicago, IL 60606 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is						
	_	☐ Contingent						
	Debtor 1 only	☐ Unliquidated	☐ Unliquidated					
	Debtor 2 only	☐ Disputed						
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured	l claim:					
	At least one of the debtors and another	☐ Student loans						
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not					
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts					
	☐ Yes	Other. Specify Collection Medical Sp						
4.12	Nationwide Credit and Collection Nonpriority Creditor's Name	Last 4 digits of account number	\$2,041.90					
	815 Commerce Drive Ste 270	When was the debt incurred?						
	Oak Brook, IL 60523 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is						
	Debtor 1 only	☐ Contingent						
		☐ Unliquidated						
	Debtor 2 only	☐ Disputed						
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured						
	At least one of the debtors and another	☐ Student loans						
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims						
	No	☐ Debts to pension or profit-sharin						
	Yes	Other. Specify Collections						
4.13	Ndc Ck Svc Nonpriority Creditor's Name	Last 4 digits of account number	2501	\$350.00				
	Po Box 661158 Chicago, IL 60666	When was the debt incurred?	Opened 9/12/09 Last Active 12/31/09					
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is						
	■ Debtor 1 only	Contingent						
	Debtor 2 only	☐ Unliquidated						
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:						
	☐ At least one of the debtors and another							
	Check if this claim is for a community debt	☐ Student loans						
	Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims						
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts						
	Yes	Other. Specify Returned C	heck					

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	Diane Bodie	Case number (if know)					
4.14	Synchrony Bank Nonpriority Creditor's Name	Last 4 digits of account number	\$0.00				
	PO Box 103104 Roswell, GA 30076	When was the debt incurred?					
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply					
	Who incurred the debt? Check one.	☐ Contingent					
	Debtor 1 only	☐ Unliquidated					
	☐ Debtor 2 only	□ Disputed					
	☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:					
	☐ At least one of the debtors and another	☐ Student loans					
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	No	☐ Debts to pension or profit-sharing plans, and other similar debts					
	Yes	Other. Specify Notice Only					
4.15	US Payday Loan	Last 4 digits of account number	\$422.00				
	Nonpriority Creditor's Name 292 S. Larkin	When was the debt incurred?					
	Joliet, IL 60436 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply					
	Who incurred the debt? Check one.						
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:					
	☐ At least one of the debtors and another	☐ Student loans					
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not					
	Is the claim subject to offset?	report as priority claims					
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts					
	Yes	■ Other. Specify Payday Loan					
4.16	USA Loans	Last 4 digits of account number	\$422.00				
	Nonpriority Creditor's Name 292 S. Larkin	When was the debt incurred?					
	Joliet, IL 60436 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply					
	Who incurred the debt? Check one.	Continued.					
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:					
	☐ At least one of the debtors and another	☐ Student loans					
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts					
	☐ Yes	■ Other. Specify Payday Loan					
Part 3:	List Others to Be Notified About a Debt	That You Already Listed					
trying more	to collect from you for a debt you owe to someone	t your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a content of the collection agency here. Simed in Parts 1 or 2, then list the collection agency here. Simed in Parts 1 or 2, list the additional creditors here. If you do not have additional personge.	ilarly, if you have				
		which entry in Part 1 or Part 2 did you list the original creditor? e of (<i>Check one</i>): Part 1: Creditors with Priority Unsecured Claims					
-NON	-	Part 2: Creditors with Nonpriority Unsecured Claims					

Pair 4: Add the Amounts for Each Type of Unsecured Clai

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6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total cl	aim
	6a.	Domestic support obligations	6a.	\$	0.00
otal claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total. Add lines 6a through 6d.	6e.	\$	0.00
				Total Claim	
	6f.	Student loans	6f.	\$	0.00
otal claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	11,273.35
	6j.	Total. Add lines 6f through 6i.	6j.	\$	11,273.35

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Fill in this infor	rmation to identify your	case:		
Debtor 1	Diane Bodie			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	whom you have the r, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	-
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.4					
	Name				
	Number	Street			
	City		State	ZIP Code	
2.5					
	Name				
	Number	Street			_
	City		State	ZIP Code	-

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Fill in th	s information to identify you	ur case:				
Debtor 1	Diane Bodie			_		
Debtor 2	First Name	Middle Name	Last Name			
(Spouse if, f	iling) First Name	Middle Name	Last Name			
United St	ates Bankruptcy Court for the	: NORTHERN DISTRICT	OF ILLINOIS			
Case nur (if known)	nber					Check if this is an amended filing
	al Form 106H dule H: Your Co	debtors				12/15
						12/10
people ar	s are people or entities who e filing together, both are ed and number the entries in the e and case number (if know	qually responsible for supp he boxes on the left. Attach	olying correct information the Additional Page to	n. If more space is	needed, c	opy the Additional Page,
1. Do	you have any codebtors? (If you are filing a joint case, of	do not list either spouse as	s a codebtor.		
□ No ■ Ye	-					
	ithin the last 8 years, have y na, California, Idaho, Louisiar					nd territories include
■ No	o. Go to line 3.					
□ Ye	es. Did your spouse, former sp	oouse, or legal equivalent live	with you at the time?			
in lir Forn	olumn 1, list all of your code ne 2 again as a codebtor onl n 106D), Schedule E/F (Offic ut Column 2.	y if that person is a guarant	tor or cosigner. Make su	ire you have listed t	the credito	or on Schedule D (Official
	Column 1: Your codebtor Name, Number, Street, City, State and	d ZIP Code		Column 2: The cre Check all schedule		hom you owe the debt
3.1	Jowanna Bodie 1525 Schoenherr Ave. Bolingbrook, IL 60490 co-signer on vehicle			■ Schedule D, I □ Schedule E/F □ Schedule G _ Santander Cons	, line	

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Fill	in this information to identify your	case:				<u> </u>			
	otor 1 Diane Bodie								
1	otor 2 use, if filing)				_				
Uni	ted States Bankruptcy Court for the	e: NORTHERN DISTRIC	CT OF ILLINOIS		_				
	se number nown)						ded filing		tpetition chapter ng date:
0	fficial Form 106I					MM / DD	YYYY		
S	chedule I: Your Inc	ome							12/1
spo atta	plying correct information. If you use. If you are separated and you ch a separate sheet to this form. t 1: Describe Employment	ur spouse is not filing wi On the top of any additi	ith you, do not includ	e infor	mati	on about your s	pouse. If	more s	pace is needed,
1.	Fill in your employment information.		Debtor 1			Debto	2 or non	-filing s	spouse
	If you have more than one job,	Employment status	☐ Employed	☐ Employed			☐ Employed		
	attach a separate page with information about additional	Employment status	■ Not employed			☐ Not	☐ Not employed		
	employers.	Occupation	Retired						
	Include part-time, seasonal, or self-employed work.	Employer's name							
	Occupation may include student or homemaker, if it applies.	Employer's address							
		How long employed the	here?						
Par	t 2: Give Details About Mo	nthly Income							
	mate monthly income as of the cuse unless you are separated.	date you file this form. If	you have nothing to re	port for	any	line, write \$0 in t	he space.	Include	your non-filing
	u or your non-filing spouse have me space, attach a separate sheet to		ombine the information	for all	empl	oyers for that pe	rson on the	e lines b	oelow. If you nee
						For Debtor 1		ebtor 2	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	0.00	\$		N/A
3.	Estimate and list monthly over	time pay.		3.	+\$	0.00	_ +\$ _		N/A

Official Form 106I Schedule I: Your Income page 1

0.00

N/A

4. Calculate gross Income. Add line 2 + line 3.

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Debto	r 1	Diane Bodie		Case	e number (<i>if known</i>	_			
	C = "	ny line 4 hore	4		r Debtor 1		For Debtor	spouse	
	Cot	by line 4 here	4.	\$_	0.00	_	\$	N/A	-
5.	List	all payroll deductions:							
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	0.00)_	\$	N/A	_
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	_	\$	N/A	-
	5c.	Voluntary contributions for retirement plans	5c.	\$_	0.0	_	\$	N/A	_
	5d.	Required repayments of retirement fund loans	5d.	\$_	0.00	_	\$	N/A	_
	5e.	Insurance	5e.	\$_	0.00		\$	N/A	_
	5f.	Domestic support obligations Union dues	5f.	\$ \$	0.00	_	\$	N/A	_
	5g. 5h.	Other deductions. Specify:	5g. 5h.⊣	· -	0.00	_	\$	N/A N/A	-
			_	\$ 			· -		=
		I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		0.00	_	\$	N/A	-
		culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	0.00	_	\$	N/A	-
	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total							
		monthly net income.	8a.	\$_	0.0	_	\$	N/A	_
	8b.	Interest and dividends	8b.	\$_	0.00)_	\$	N/A	=
	8c. 8d.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation	8c. 8d.	\$_ \$_	0.00)	\$ 	N/A N/A	-
	8e.	Social Security	8e.	\$_	1,362.00)	\$	N/A	_
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income	e 8f. 8g.	\$_ \$	0.00 556.5	_	\$	N/A N/A	_
	8h.	Other monthly income. Specify:	8h.+		0.00	_	\$	N/A	_
			_			_ 			- ¬
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	1,918.5	3	\$	N/A	A
10.	Cal	culate monthly income. Add line 7 + line 9.	10. \$		1,918.58 +	\$	N/A	= \$	1,918.58
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			1 [_	,
	Incl othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your per friends or relatives. In the include any amounts already included in lines 2-10 or amounts that are not wife;	deper		•		d in <i>Schedu</i>	le J. +\$	0.00
		It the amount in the last column of line 10 to the amount in line 11. The restet that amount on the Summary of Schedules and Statistical Summary of Certallies						\$Combin	1,918.58 ned
40	D -		_					monthl	y income
	Do ¹ ■ □	you expect an increase or decrease within the year after you file this form No. Yes. Explain:	(

Official Form 106I Schedule I: Your Income page 2

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Fill	in this information to identify your case:					
Deb	tor 1 Diane Bodie		Check	if this is:		
	tor 2	 ☐ An amended filing ☐ A supplement showing postpetition chapter 13 expenses as of the following date: 				
' '	ed States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLING	MM / DD / YYYY				
			IVII	WI / DD / 11111		
	e number nown)					
Of	fficial Form 106J					
	chedule J: Your Expenses				12/15	
info	as complete and accurate as possible. If two married people are brmation. If more space is needed, attach another sheet to this finber (if known). Answer every question.					
Par 1.	Describe Your Household Is this a joint case?					
١.	No. Go to line 2.					
	☐ Yes. Does Debtor 2 live in a separate household?					
	☐ No ☐ Yes. Debtor 2 must file Official Form 106J-2, <i>Expenses</i>	for Separate Housel	<i>hold</i> of Debto	r 2.		
2.	Do you have dependents? ■ No					
	Do not list Debtor 1	Dependent's relation Debtor 1 or Debtor 2		Dependent's age	Does dependent live with you?	
	Do not state the				□ No	
	dependents names.				☐ Yes ☐ No	
					☐ Yes	
					□ No	
					☐ Yes ☐ No	
					☐ Yes	
3.	Do your expenses include No					
	expenses of people other than yourself and your dependents?					
Par	t 2: Estimate Your Ongoing Monthly Expenses					
Est exp	imate your expenses as of your bankruptcy filing date unless your bankruptcy filing date unless your bankruptcy is filed. If this is a supplibilicable date.					
Incl	lude expenses paid for with non-cash government assistance if	vou know				
the	value of such assistance and have included it on Schedule I: Y			Your expe	nses	
(Official Form 106l.)						
4.	The rental or home ownership expenses for your residence. In payments and any rent for the ground or lot.	nclude first mortgage	4. \$		875.00	
	If not included in line 4:					
	4a. Real estate taxes		4a. \$		0.00	
	4b. Property, homeowner's, or renter's insurance		4b. \$		0.00	
	4c. Home maintenance, repair, and upkeep expenses 4d. Homeowner's association or condominium dues		4c. \$ 4d. \$		0.00 0.00	
5.	Additional mortgage payments for your residence, such as hor	me equity loans	5. \$		0.00	

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Deb	tor 1 Diane Bodie	Case num	ber (if known)	
6.	Utilities:			
	6a. Electricity, heat, natural gas	6a.	\$	250.00
	6b. Water, sewer, garbage collection	6b.	\$	0.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	0.00
	6d. Other. Specify:	6d.	\$	0.00
7.	Food and housekeeping supplies		\$	250.00
8.	Childcare and children's education costs	8.	\$	0.00
9.	Clothing, laundry, and dry cleaning	9.	\$	25.00
10.	Personal care products and services	10.	\$	25.00
11.	Medical and dental expenses	11.	\$	50.00
12.	Transportation. Include gas, maintenance, bus or train fare.			4== 00
	Do not include car payments.	12.	·	175.39
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
14.	Charitable contributions and religious donations	14.	\$	0.00
15.	Insurance.			
	Do not include insurance deducted from your pay or included in lines 4 or 20.			
	15a. Life insurance	15a.	\$	73.19
	15b. Health insurance	15b.	\$	0.00
	15c. Vehicle insurance	15c.	\$	0.00
	15d. Other insurance. Specify:	15d.	\$	0.00
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.			
	Specify:	16.	\$	0.00
17.	Installment or lease payments:			
	17a. Car payments for Vehicle 1	17a.	\$	0.00
	17b. Car payments for Vehicle 2	17b.	\$	0.00
	17c. Other. Specify:	17c.	\$	0.00
	17d. Other. Specify:	17d.	\$	0.00
18.	Your payments of alimony, maintenance, and support that you did not report as		-	
	deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).		\$	0.00
19.	Other payments you make to support others who do not live with you.		\$	0.00
	Specify:	19.		
20.	Other real property expenses not included in lines 4 or 5 of this form or on School	edule I: Y	our Income.	
	20a. Mortgages on other property	20a.	\$	0.00
	20b. Real estate taxes	20b.	\$	0.00
	20c. Property, homeowner's, or renter's insurance	20c.	\$	0.00
	20d. Maintenance, repair, and upkeep expenses	20d.	\$	0.00
	20e. Homeowner's association or condominium dues	20e.	\$	0.00
21.	Other: Specify:	21.	+\$	0.00
22.	Calculate your monthly expenses			
	22a. Add lines 4 through 21.		\$	1,723.58
	22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
	22c. Add line 22a and 22b. The result is your monthly expenses.		\$	1,723.58
	, , ,			.,
23.	Calculate your monthly net income.			
	23a. Copy line 12 (your combined monthly income) from Schedule I.	23a.		1,918.58
	23b. Copy your monthly expenses from line 22c above.	23b.	-\$	1,723.58
	23c. Subtract your monthly expenses from your monthly income.	23c.	\$	195.00
	The result is your monthly net income.	230.	Ψ	133.00
24.	Do you expect an increase or decrease in your expenses within the year after your car loan within the year or do you expect your modification to the terms of your mortgage? No.			se or decrease because of a
	Yes. Explain here:			

Fill in this infor	mation to identify you	r case:			
Debtor 1	Diane Bodie				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT OF	ILLINOIS		
Case number _ (if known)					☐ Check if this is an amended filing
Official Form		an Individual D	ehtor's Sch	nedules	12/15
Boolarat	ion / wout	an marriada B	00101 0 001	1044100	12/13
You must file thi obtaining money	s form whenever you	in connection with a bankrup	amended schedules.	Making a false stat	tement, concealing property, or 00, or imprisonment for up to 20
	n Below				
Did you pa	y or agree to pay som	eone who is NOT an attorney	to help you fill out ba	ankruptcy forms?	
■ No					
☐ Yes. N	Name of person				nkruptcy Petition Preparer's Notice, n, and Signature (Official Form 119)
	e true and correct.	e that I have read the summar	ry and schedules filed	l with this declarati	ion and
Diane I Signatur	Bodie re of Debtor 1		Signature of D	Debtor 2	

Date **February 11, 2016**

Debtor 1 Diane Bodie First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (If known) Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correctinformation. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and continued to the continued of the continu	
First Name Middle Name Last Name L	
Check if this is a amended filing	
Case number (if known) Check if this is a amended filing Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correctinformation. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and on number (if known). Answer every question.	
Case number (if known) Check if this is a amended filing Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correctinformation. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and on number (if known). Answer every question.	
Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and conumber (if known). Answer every question.	
Statement of Financial Affairs for Individuals Filing for Bankruptcy Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and on number (if known). Answer every question.	an
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and conumber (if known). Answer every question.	
information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and on number (if known). Answer every question.	12/1
ESTABLE COMO LIGADIO ABOUT VOUS BROSTON STORIC ONG BINDES VOU LIVES DATORS	
Part 1: Give Details About Your Marital Status and Where You Lived Before	
1. What is your current marital status?	
☐ Married	
■ Not married	
2. During the last 3 years, have you lived anywhere other than where you live now?	
■ No	
Yes. List all of the places you lived in the last 3 years. Do not include where you live now.	
Debtor 1 Prior Address: Dates Debtor 1 lived there Debtor 2 Prior Address: Dates Debtor 1 Debtor 2 Prior Address: Dates Debtor 2 Prior Address:	or 2
3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.)	y propert
■ No	
☐ Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).	
Part 2 Explain the Sources of Your Income	
4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.	
□ No	
Yes. Fill in the details.	
Debtor 1 Debtor 2	
Sources of income Check all that apply. Gross income (before deductions and exclusions) Sources of income Check all that apply. (before deductions and exclusions) Gross income Check all that apply. (before deductions)	uctions
For last calendar year: (January 1 to December 31, 2015) Wages, commissions, bonuses, tips Wages, commissions, bonuses, tips	
☐ Operating a business ☐ Operating a business	

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Debtor 1	1 Dia	ane Bodie			Case	e number (if known)	
				Debtor 1		Debtor 2	
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	
		dar year befor December 31		■ Wages, commissions, bonuses, tips	\$26,564.00	☐ Wages, commiss bonuses, tips	ions,
				☐ Operating a business		☐ Operating a busing	ness
Inclu une gam	ude ind mployinbling a	come regardles ment, and othe and lottery win	ss of wheth er public be nings. If yo	er that income is taxable. Ex nefit payments; pensions; rer u are filing a joint case and y	o previous calendar years? amples of other income are a ntal income; interest; dividend ou have income that you recontelly. Do not include income	alimony; child support; ds; money collected fro eived together, list it or	om lawsuits; royalties; and lly once under Debtor 1.
	Yes.	Fill in the deta	ils.				
				Debtor 1 Sources of income Describe below	Gross income (before deductions and	Debtor 2 Sources of income Describe below.	(before deductions
From January 1 of current year until the date you filed for bankruptcy:				SSI Benefits	exclusions) \$2,724.00		and exclusions)
				Retirement Income - Pension	\$1,113.16		
		dar year: December 31	, 2015)	SSI Benefits	\$8,172.00		
				Retirement Income - Pension	\$4,668.31		
Part 3:	List	: Certain Payn	nents You	Made Before You Filed for	Bankruptcy		
6. Are □	either No.	Neither Debt	tor 1 nor D	s debts primarily consume ebtor 2 has primarily const personal, family, or househo	u <mark>mer debts.</mark> Consumer debt	s are defined in 11 U.S	.C. § 101(8) as "incurred by ar
		– ~	days befo o to line 7		id you pay any creditor a tota	I of \$6,225* or more?	
		p	aid that cre		id a total of \$6,225* or more nts for domestic support oblic his bankruptcy case.		nts and the total amount you upport and alimony. Also, do
					s after that for cases filed on	or after the date of adj	justment.
	Yes.			r both have primarily consure you filed for bankruptcy, di	umer debts. id you pay any creditor a tota	l of \$600 or more?	
			Go to line 7.				
		iı	nclude payı		id a total of \$600 or more and bligations, such as child sup		
Cre	editor'	s Name and A	Address	Dates of payme	ent Total amount	Amount you Wa	s this payment for

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Del	ebtor 1 Diane Bodie		Case number (if known)						
7.	Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.								
	NoYes. List all payments to an insider								
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for th	nis payment			
8.	Within 1 year before you filed for bank insider? Include payments on debts guaranteed o		ments or transfer a	any property on a	ccount of a del	ot that benefited an			
	■ No								
	☐ Yes. List all payments to an insider								
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for the Include credite				
Pai	rt 4: Identify Legal Actions, Reposses	ssions, and Foreclosures							
9.	Within 1 year before you filed for bank List all such matters, including personal in modifications, and contract disputes. No Yes. Fill in the details.								
	Case title Case number	Nature of the case	Court or agency		Status of the	case			
10.	Within 1 year before you filed for bank Check all that apply and fill in the details No Yes. Fill in the information below.		erty repossessed, f	oreclosed, garnis	shed, attached,	seized, or levied?			
	Creditor Name and Address	Describe the Property		Date		Value of the			
		Explain what happened	i			property			
11.	Within 90 days before you filed for ban accounts or refuse to make a payment ■ No □ Yes. Fill in the details.		luding a bank or fii	nancial institutio	n, set off any aı	mounts from your			
	Creditor Name and Address	Describe the action the	creditor took	Date taker	action was	Amount			
12.	Within 1 year before you filed for bank court-appointed receiver, a custodian,		erty in the possess	ion of an assigne	ee for the benef	it of creditors, a			
	☐ Yes								
Pai	rt 5: List Certain Gifts and Contribution	ons							
13.	Within 2 years before you filed for ban	kruptcy, did you give any gift	s with a total value	of more than \$60	00 per person?				
	Yes. Fill in the details for each gift. Gifts with a total value of more than \$ per person	Describe the gifts		Dates the g	s you gave ifts	Value			
	Person to Whom You Gave the Gift an Address:	nd							

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Del	otor 1 Diane Bodie			Case number	(if known)	
14.	Within 2 years before you filed for bank	ruptcy,	did you give any gifts or contributio	ns with a tota	Il value of more than	\$600 to any charity
	No					
	Yes. Fill in the details for each gift or	contribu	ution.			
	Gifts or contributions to charities that more than \$600	total	Describe what you contributed		Dates you contributed	Value
	Charity's Name				Contributed	
	Address (Number, Street, City, State and ZIP Cod	le)				
Pai	t 6: List Certain Losses					
15.	Within 1 year before you filed for bankru disaster, or gambling?	uptcy o	r since you filed for bankruptcy, did	you lose anyt	hing because of the	ft, fire, other
	■ No					
	Yes. Fill in the details.					
	Describe the property you lost and	Descr	ibe any insurance coverage for the I	066	Date of your	Value of property
	how the loss occurred		e the amount that insurance has paid.		loss	lost
			ng insurance claims on line 33 of <i>Sche</i> o			
		Prope	rty.			
Pai	t 7: List Certain Payments or Transfer	s				
ıe	Within 1 year before you filed for bankru	intev d	lid you or anyone else acting on you	r hehalf nav d	or transfer any prope	rty to anyone you
ΙΟ.	consulted about seeking bankruptcy or	prepari	ing a bankruptcy petition?			ity to anyone you
	Include any attorneys, bankruptcy petition	prepare	rs, or credit counseling agencies for se	ervices required	d in your bankruptcy.	
	□ No					
	Yes. Fill in the details.					
	Person Who Was Paid		Description and value of any prop	ortv	Date payment	Amount of
	Address		transferred	Derty	or transfer was	payment
	Email or website address				made	
	Person Who Made the Payment, if Not Deshur Law Firm LLC	You	Attornov Food		2/1/2016	\$350.00
	55 W. Monroe		Attorney Fees		2/1/2010	\$350.00
	Suite 3950					
	Chicago, IL 60603					
	brian@deshurlaw.com					
17.	Within 1 year before you filed for bankru promised to help you deal with your cre Do not include any payment or transfer tha	ditors	or to make payments to your creditor		or transfer any prope	rty to anyone who
	_					
	No					
	Yes. Fill in the details.				_	
	Person Who Was Paid Address		Description and value of any prop transferred	perty	Date payment or transfer was	Amount of payment
	Address		uansierieu		made	payment
ıο	Within 2 years before you filed for bank	runtev	did you sell trade or otherwise tran	sefor any pror	perty to anyone othe	r than property
10.	transferred in the ordinary course of you Include both outright transfers and transfer include gifts and transfers that you have al	u r busi ı s made	ness or financial affairs? as security (such as the granting of a			
	No	. Judy III				
	Yes. Fill in the details.					
	Person Who Received Transfer		Description and value of	Describe a	any property or	Date transfer was
	Address		property transferred	payments	received or debts	made
	Person's relationship to you			paid in ex	change	
	. o.oon o rolationomp to you					

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Debtor 1 Diane Bodie Case number (if known)

9.	Within 10 years before you filed for bankruptcy beneficiary? (These are often called asset-protection No Yes. Fill in the details.		y property to a	a self-settle	d trust or similar device	of which you are a
	Name of trust	Description and v	alue of the pro	operty trans	sferred	Date Transfer was made
Par	List of Certain Financial Accounts, Instru	ıments, Safe Deposi	t Boxes, and S	Storage Uni	ts	
 Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in you sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; share houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details. 			•			
		est 4 digits of ecount number	Type of acco	ount or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
:1.	Do you now have, or did you have within 1 year cash, or other valuables?	r before you filed for	bankruptcy, a	any safe de	posit box or other depos	sitory for securities,
	■ No □ Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe	the contents	Do you still have it?
2.	Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy					
	■ No □ Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or I to it? Address (Number, S State and ZIP Code)		Describe	the contents	Do you still have it?
Par	19: Identify Property You Hold or Control for	Someone Else				
3. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trus for someone.				for, or hold in trust		
	■ No □ Yes. Fill in the details.					
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe	the property	Value
Par	10: Give Details About Environmental Inform	ation				

For the purpose of Part 10, the following definitions apply:

- Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

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Debtor 1 Diane Bodie Case number (if known)

24.	Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?								
	■ No								
	☐ Yes.	Fill in the details.							
	Name of Address	Site (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	d	Environmental law, if you know it	Date of notice			
25.	Have you	notified any governmental unit of	any release of hazardous material?						
	■ No □ Yes.	Fill in the details.							
	Name of Address	Site (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	d	Environmental law, if you know it	Date of notice			
26.	Have you	been a party in any judicial or adı	ministrative proceeding under any envi	iron	mental law? Include settlements a	and orders.			
	■ No □ Yes.	Fill in the details.							
	Case Titl Case Nu		Court or agency Name Address (Number, Street, City, State and ZIP Code)	Na	ture of the case	Status of the case			
Par	t 11: Giv	e Details About Your Business or	Connections to Any Business						
27.	Within 4 y	ears before you filed for bankrup	tcy, did you own a business or have ar	ny of	f the following connections to any	business?			
	ПΑ	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time							
	ПΑ	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)							
	☐ A partner in a partnership								
	☐ An officer, director, or managing executive of a corporation								
	☐ An owner of at least 5% of the voting or equity securities of a corporation								
	 No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. 								
	Business Name Address		Describe the nature of the business						
		reet, City, State and ZIP Code)	Name of accountant or bookkeeper		Dates business existed	idiliber of friiv.			
28.		rears before you filed for bankrup ns, creditors, or other parties.	tcy, did you give a financial statement	to a	nyone about your business? Inclu	ide all financial			
	■ No □ Yes.	Fill in the details below.							
	Name Address	reet, City, State and ZIP Code)	Date Issued						

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Debto	r1 Diane Bodie		Case number (if known)	
Part 1	2: Sign Below			
are tru with a		king a false statement, concealing	hments, and I declare under penalty of perjury g property, or obtaining money or property by fr for up to 20 years, or both.	
/s/ Di	ane Bodie			
	e Bodie ture of Debtor 1	Signature of Debt	or 2	
Date	February 11, 2016	Date		
Did yo	u attach additional pages to Your St	atement of Financial Affairs for li	ndividuals Filing for Bankruptcy (Official Form	107)?
■ No				
☐ Yes				
Did yo	u pay or agree to pay someone who	is not an attorney to help you fill	out bankruptcy forms?	
■ No				
☐ Yes	. Name of Person Attach the E	Bankruptcy Petition Preparer's Notic	e, Declaration, and Signature (Official Form 119).	

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter	7 :	Liquidation	
\$	245	filing fee	
	\$75	administrative fee	
+	\$15	trustee surcharge	
9	335	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

\$200 filing fee + \$75 administrative fee \$275 total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

\$235 filing fee+ \$75 administrative fee\$310 total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html.

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCreditAndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-04333 Doc 1 Filed 02/11/16 Entered 02/11/16 18:20:13 Desc Main Document Page 45 of 48

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

		Not them District of Himons	•		
In 1	re Diane Bodie	Debtor(s)	Case No. Chapter	13	
			-		
	DISCLOSU	TRE OF COMPENSATION OF ATTO	RNEY FOR DE	BTOR(S)	
1.	compensation paid to me within	and Fed. Bankr. P. 2016(b), I certify that I am the attorn to one year before the filing of the petition in bankruptcy, otor(s) in contemplation of or in connection with the bar	or agreed to be paid	to me, for services re	
	For legal services, I have a	greed to accept	\$	4,000.00	
	Prior to the filing of this st	atement I have received		350.00	
				3,650.00	
2.	The source of the compensation	paid to me was:			
	■ Debtor □ Oth	er (specify):			
3.	The source of compensation to	be paid to me is:			
	■ Debtor □ Oth	er (specify):			
4.	■ I have not agreed to share the	ne above-disclosed compensation with any other person	unless they are memb	pers and associates of	f my law firm
		bove-disclosed compensation with a person or persons we ther with a list of the names of the people sharing in the			aw firm. A
5.	In return for the above-disclose	d fee, I have agreed to render legal service for all aspect	ts of the bankruptcy c	ase, including:	
	 b. Preparation and filing of any c. Representation of the debtor d. Representation of the debtor e. [Other provisions as needed Negotiations with s 	ncial situation, and rendering advice to the debtor in det y petition, schedules, statement of affairs and plan which at the meeting of creditors and confirmation hearing, an in adversary proceedings and other contested bankrupted eccured creditors to reduce to market value; exements and applications as needed; preparation	n may be required; nd any adjourned hea cy matters; emption planning;	rings thereof;	filing of
		dance of liens on household goods.	i and illing of moti	ons pursuant to i	1 030
6.	By agreement with the debtor(s), the above-disclosed fee does not include the following	g service:		
		CERTIFICATION			
this	I certify that the foregoing is a case bankruptcy proceeding.	complete statement of any agreement or arrangement for	payment to me for re	presentation of the d	ebtor(s) in
	February 11, 2016	/s/ Brian P. Desh	ur		
	Date	Brian P. Deshur (Signature of Attorne			
		Deshur Law Firm			
		55 W. Monroe			
		Suite 3950	•		
		Chicago, IL 6060 312-380-1564 Fa			
		brian@deshurlav			

Name of law firm

United States Bankruptcy Court Northern District of Illinois

		Not then District of Hillions		
In re	Diane Bodie		Case No.	
		Debtor(s)	Chapter	13
	V	ERIFICATION OF CREDITOR M	MATRIX	
		Number of	f Creditors: _	1
	The above-named Debtor(s (our) knowledge.	s) hereby verifies that the list of credi	tors is true and	correct to the best of my
Date:	February 11, 2016	/s/ Diane Bodie		

DuPage Medical Group 15921 Collections Center Dr. Chicago, IL 60693

Dupage Medical Group 159 Collections Center Drive Chicago, IL 60693

Edward Hospital PO Box 4207 Carol Stream, IL 60197

Elmhurst Hospital Inpatient 155 Brush Hill Road Elmhurst, IL 60126

ELMHURST MEMORIAL HOSPITAL 155 E Brush Hill Rd Elmhurst, IL 60126

ERC/Enhanced Recovery Corp 8014 Bayberry Rd Jacksonville, FL 32256

Global Payments Check Po Box 59371 Chicago, IL 60659

Jowanna Bodie 1525 Schoenherr Ave. Bolingbrook, IL 60490

Lockport Fire & Ambulance 19623 Renwick Road Lockport, IL 60441

Malcolm S. Gerald and Associates 332 S. Michigan Ave. Ste 600 Chicago, IL 60604

Merchants Credit 223 W Jackson Blvd Ste 700 Chicago, IL 60606 Merchants Credit 223 W Jackson Blvd Ste 700 Chicago, IL 60606

Nationwide Credit and Collection 815 Commerce Drive Ste 270 Oak Brook, IL 60523

Ndc Ck Svc Po Box 661158 Chicago, IL 60666

Santander Consumer Bank USA PO Box 660633 Dallas, TX 75266

Silverleaf Resorts 8505 W. Irlo Bronson Memorial Hwy Kissimmee, FL 34747

Synchrony Bank PO Box 103104 Roswell, GA 30076

US Payday Loan 292 S. Larkin Joliet, IL 60436

USA Loans 292 S. Larkin Joliet, IL 60436